

For office use only
Hours received Date
Hours entered by
Total hours earned to date

Bright Futures Community Service Proposal

Name		Date	
Student #High S		choolGraduation Year	
Organization(s) wl (describe activity)	here the hours will be performed:	Answer yes (Y) or no (N) to all of the following questions in the spaces provided:	Y/N
		Is the activity family related?	
		Will you be compensated either financially or with some other material benefit?	
		Is the activity court mandated community service?	
What social issue(s) will your activity address? (circle all that apply):		Is the service for the sole benefit of a religious house of worship and/or its congregation?	
Abuse	Health	Will you be fostering animals?	
Animals	Homelessness	Is the activity required for one of your classes?	
Education	Hunger	Are you donating an item like blood, hair, or canned food?	
Elderly	Poverty	Will the hours be submitted after your graduation?	
Environment	Other:	Will a leader or responsible adult (not parent/guardian) with the organization be on site to evaluate and confirm student performance?	
the completion community ser Gold Seal Voca are the respons has presented a Scholarship Prograduation data to graduation v	at this proposal to participate in cor of documented community servi- vice requirement of the Florida Ac- ational Scholars Award. Selection o ibility of the student. Signature of the nappropriate social issue for meeting ogram. All community service hour	mmunity service is entirely voluntary on my part and to ce related to this proposal can be used to satisfy cademic Scholarship, Florida Medallion Scholarship af the organization, services performed, and documentate the Community Service Contact indicates that the study the community service requirement of the Bright Future of the documentation MUST be submitted by the school ubmitted after the graduation date even if earned press.	the and ion lent ires
Student Signatu	nre	Date	
High School Co	ommunity Service Contact Signature	Date	